AMENDED IN SENATE MAY 22, 2008 AMENDED IN SENATE MAY 12, 2008 AMENDED IN SENATE APRIL 21, 2008

SENATE BILL

No. 1665

Introduced by Senator Machado

February 22, 2008

An act to add Chapter 3.14 (commencing with Section 15820.200) to Part 10b of Division 3 of Title 2 of the Government Code, relating to prisons, making an appropriation therefor, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

SB 1665, as amended, Machado. Prison construction.

Existing law establishes the Department of Corrections and Rehabilitation, and charges it with various duties in regard to the custody of prisoners, including medical care. Existing law has authorized the issuance of bonds for various prison construction projects.

This bill would create the Prison Health Care Construction Program, which would be administered by the Medical Care Receiver, and would address the need to design and construct improvements to existing facilities and to design and construct health-related facilities and housing for approximately 10,000 inmates with medical or mental health needs, and supporting infrastructure and ancillary facilities at existing prison facilities statewide or at other appropriate state-owned real property, to provide the constitutionally appropriate level of health care for inmates in correctional facilities statewide.

The bill would authorize \$6,900,000,000 in revenue bonds for those purposes, and would appropriate \$100,000,000 from the General Fund

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to the Department of Corrections and Rehabilitation for certain of those purposes.

The bill would make findings and declarations in connection to the Prison Health Care Construction Program.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: $\frac{2}{3}$. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Chapter 3.14 (commencing with Section 15820.200) is added to Part 10b of Division 3 of Title 2 of the Government Code, to read:

Chapter 3.14. Prison Health Care Construction Program

15820.200. The Legislature finds and declares all of the following:

- (a) On February 14, 2006, the United States District Court in the case of Plata v. Schwarzenegger (No. C01-01351-TEH) suspended the exercise of authority by the Secretary of the Department of Corrections and Rehabilitation related to the administration, control, management, operation, and financing of the California prison medical health care system and vested those powers in a Medical Care Receiver appointed by the court commencing on April 17, 2006, until further order of the court.
- (b) Those powers include assessing the suitability of existing medical care facilities and the design and construction of upgrades or replacement facilities.
- (c) The Medical Care Receiver, in consultation with the court and the Special Master in Coleman v. Schwarzenegger (No. CIV S-90-00520-LKK-JFM), has determined that it is necessary to immediately design and construct improvements to existing facilities and to design and construct health-related facilities and housing for approximately 10,000 inmates with medical or mental health needs, and supporting infrastructure and ancillary facilities at existing prison facilities statewide or at other appropriate state-owned real property to provide the constitutionally

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1 appropriate level of health care for inmates in correctional facilities

- 2 statewide. It is intended that implementation of these efforts will
- 3 assist the state in compliance matters related to the cases Plata v.
- 4 Schwarzenegger (No. C01-01351-TEH), Coleman v
- 5 Schwarzenegger (No. CIV S-90-00520-LKK-JFM), Perez v. Tilton
- 6 (No. C05-05241 JSW), and Armstrong v. Schwarzenegger (No. 7 C94-02307-CW).

- (d) It is necessary to amend certain statutes and authorize delivery methodologies in order for the Medical Care Receiver to immediately design and construct new facilities and upgrades at existing correctional facilities in order to improve the delivery of medical and mental health care.
- 15820.201. For the purposes of this chapter, the following definitions shall apply:
- (a) "Act" means the State Building Construction Act of 1955 (Part 10b (commencing with Section 15800) of Division 3 of Title 2).
 - (b) "Board" means the State Public Works Board.
- (c) "Department" means the Department of Corrections and Rehabilitation.
- (d) "Health Care Expansion Program" means the program to develop health-related facilities for inmates with medical health needs and mental health needs together with dental treatment space for the inmates housed in the health-related facilities at existing prison facilities, or at other appropriate state-owned real property.
- (e) "Health Care Improvement Program" means the program to develop health-related facilities to be designed and constructed at existing department facilities in order to immediately improve the delivery of medical and mental health care, but unrelated to the expanded capacity and facilities contemplated under the Health Care Expansion Program.
- (f) "Health-related facilities" means state-owned facilities whose construction is administered by the Medical Care Receiver for treatment, housing, program, and administrative space for inmates with medical or mental health needs, and the infrastructure and ancillary facilities necessary to support that space. Health-related facilities are public buildings, as defined in this part.
- (g) "Medical Care Receiver" means the person appointed by the United States District Court in the case of Plata v.

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1 Schwarzenegger (No. C01-01351-TEH) to oversee management 2 and operation of the state prison medical system.

- (h) "Prison Health Care Construction Program" means the Health Care Expansion Program and the Health Care Improvement Program authorized by this chapter and administered by the Medical Care Receiver.
- (i) "Project" means an individual component part or parts at an institution or other state-owned property, within a program authorized by this chapter.

15820.202. The purpose of this chapter is to authorize funding and financing for the Prison Health Care Construction Program and to describe the procurement methods that the Medical Care Receiver is authorized to use for implementing the Prison Health Care Construction Program.

15820.203. (a) In order to expedite the Prison Health Care Construction Program, and notwithstanding any other provision of law, the Medical Care Receiver may solicit proposals and enter into contracts for the study, planning, design, development, construction, rebuilding, improvement, or repair, or any combination thereof, for the Prison Health Care Construction Program based upon a value-based, competitive negotiation process.

- (b) Solicitations or contracts authorized pursuant to this section may be executed by the Medical Care Receiver through the California Prison Health Care Receivership Corporation on behalf of the department. Entities may be selected by the Medical Care Receiver subject to the oversight of the federal court and to all of the following criteria:
- (1) The Medical Care Receiver shall use as the primary selection criteria the demonstrated competence and qualifications for the study, planning, design, developing, construction, rebuilding, improvement, or repair, or any combination thereof, of the Prison Health Care Construction Program.
- (2) The Medical Care Receiver shall ensure that the Prison Health Care Construction Program is delivered under contracts entered into pursuant to this section at a fair and reasonable price.
- (3) The Medical Care Receiver shall not enter into any solicitation or contract that may result in unlawful activity, including, but not limited to, rebates or kickbacks.

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(4) The Medical Care Receiver shall not enter into a contract that uses employees or consultants of the Medical Care Receiver when those employees or consultants have a relationship with a person or business entity seeking a contract under this section that would subject those employees to the prohibition of Section 87100 if they were state or local public officials.

- (c) The scope and cost of the projects that comprise the Prison Health Care Construction Program shall be subject to project scope and cost approval and administrative oversight by the board, as outlined in Section 13332.11 or 13332.19, as applicable, except that for the purposes of this chapter, any duties or functions to be performed by the Director of General Services under those sections shall be performed by the Medical Care Receiver. For purposes of this chapter, the availability of an augmentation for individual projects shall be calculated based on the total capital outlay appropriations contained in Sections 15820.205 and 15820.206 and is not limited to 20 percent of the individual project cost allocation.
- (d) For each project under the Health Care Expansion Program, the Medical Care Receiver shall submit a report to the Joint Legislative Budget Committee 30 days prior to requesting project scope and cost approval from the board. The report shall include the project's proposed scope, location, cost, schedule, and number of beds by security level. The Medical Care Receiver shall submit an updated report to the Joint Legislative Budget Committee upon requesting project approval from the board.
- (d) (1) For each project authorized in this section under the Prison Health Care Construction Program, at least 45 days prior to submission to the State Public Works Board, the Medical Care Receiver shall submit to the Joint Legislative Budget Committee information on the project's scope and costs and, when appropriate, documentation of preliminary plans. Documentation of preliminary plans shall not be required for any project in which the Medical Care Receiver proceeds under the authority provided in this section for a value-based, competitive negotiation process. In cases where the documentation of preliminary plans is determined to be appropriate, that documentation shall include all of the following:
- (A) A preliminary plan submittal package, as defined by the State Administrative Manual.

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- (B) An estimate of the annual operating costs of the facility.
 - (C) A staffing plan for the operation of the facility.
- (D) A plan for providing medical, mental health, and dental care to inmates.
- (E) A plan for inmate programming at the facility, including education, work, and substance abuse programming.
- (2) The information submitted on a project's scope and costs specified in paragraph (1) shall include the project's proposed scope, location, cost, schedule, number of beds by security level, and any other information provided to the board under subdivision (c). If the Joint Legislative Budget Committee fails to take any action with respect to the information and documentation concerning a project submitted pursuant to paragraph (1) within 45 days after that submission, this inaction shall be deemed to be approval for purposes of this section, and the Medical Care Receiver is authorized to design, construct, or renovate prison housing units, support buildings, programming space, and all related infrastructure for each institution for which a notice has been approved.
- (e) The Medical Care Receiver may seek board approval for the first three projects under the Health Care Expansion Program, which shall constitute phase 1 of the program. Before seeking board approval for the next two projects under the Health Care Expansion Program, which shall constitute phase 2 of the program, the Medical Care Receiver shall conduct a reassessment of the inmates' mental and medical health needs to determine whether additional projects under the Health Care Expansion Program are reasonably necessary, taking into account any significant changes anticipated in the population of inmates. The Medical Care Receiver shall seek board approval for phase 2 of the program only if the Medical Care Receiver determines that those projects are reasonably necessary. Before seeking approval for any additional projects under the Health Care Expansion Program, which shall constitute phase 3 of the program, the Medical Care Receiver shall conduct another reassessment as described above and shall seek board approval for phase 3 of the program only if the Medical Care Receiver determines that those projects are reasonably necessary.
- 39 15820.204. For purposes of compliance with the California 40 Environmental Quality Act (Division 13 (commencing with Section

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21000) of the Public Resources Code), the board shall not be deemed a lead or responsible agency. However, nothing in this chapter exempts the department or the Medical Care Receiver from the requirements of that division.

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15820.205. (a) The board may issue up to six billion nine hundred million dollars (\$6,900,000,000) in revenue bonds, negotiable notes, or negotiable bond anticipation notes pursuant to this part, to finance the design and construction and a reasonable construction reserve for the Prison Health Care Construction Program as that amount may be augmented in accordance with this chapter and other additional amounts authorized in Section 15849.6.

- (b) The department may borrow funds for project costs that are part of the Prison Health Care Construction Program from the Pooled Money Investment Account pursuant to Sections 16312 and 16313 or from any other appropriate source. In the event any of the revenue bonds, notes, or bond anticipation notes authorized by this chapter are not sold, the department shall commit a sufficient amount of its support appropriation to repay any loans made from the Pooled Money Investment Account for the Prison Health Care Construction Program.
- (c) The department and the board shall execute and deliver any and all leases, contracts, agreements, or other documents necessary for the sale of bonds or other financing for the Prison Health Care Construction Program.
- (d) All project-related capital expenditures for the Prison Health Care Construction Program made on or after the date this chapter is enacted that are paid from an appropriation that supports the operations of the Medical Care Receiver shall be deemed a loan from the General Fund to the department and shall be repaid with the proceeds of bonds or notes authorized pursuant to this chapter. In addition, the above-described General Fund loan or loans may be repaid by a loan from the Pooled Money Investment Account, as provided in subdivision (b).
- (e) Notwithstanding Section 13340, funds derived pursuant to this section are continuously appropriated for purposes of this chapter.
- (f) Any action or proceeding challenging the validity of the bonds or notes or financing contracts authorized by this chapter shall be brought in accordance with and within the time specified

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under Chapter 9 (commencing with Section 860) of Title 10 of
 Part 2 of the Code of Civil Procedure.

15820.206. The amount of one hundred million dollars (\$100,000,000) is hereby appropriated from the General Fund to the department for use by the Medical Care Receiver in implementing the Health Care Improvement Program. This appropriation may be allocated by the board, on a project-by-project basis, for those costs that the board determines, in its sole discretion, may not lend themselves to lease revenue bond financing. Notwithstanding Section 13340, funds authorized by this section are continuously appropriated for purposes of this chapter.

15820.207. (a) All plans and specifications for the Prison Health Care Construction Program shall comply with all applicable building codes for state-owned facilities.

- (b) The Medical Care Receiver is authorized to use any method to secure the completion of a project and the payment of trade contractors, material suppliers, and other parties contracting to provide goods or services to the project, including, but not limited to, requiring payment and performance bonds, default insurance, letters of credit, or escrow accounts for any project within the Prison Health Care Construction Program.
- (c) The provisions of Chapter 1 (commencing with Section 1720) of Part 7 of Division 2 of the Labor Code shall apply to all public works contracts entered into for the Prison Health Care Construction Program.
- (d) Except as provided in this section and Sections 15820.201 to 15820.205, inclusive, private sector methods may be used to administer the Prison Health Care Construction Program projects. Specifically, notwithstanding subdivision (a) of Section 15815, the design, procurement and contracting, construction, and insuring of the Prison Health Care Construction Program projects, and resolution of any disputes related thereto, shall not be subject to the State Contract Act (Chapter 1 (commencing with Section 10100) of Part 2 of Division 2 of the Public Contract Code), or to any other provision of state law governing public procurement or public works projects.
- (e) The provisions of Chapter 11 (commencing with Section 7000) of Title 7 of Part 3 of the Penal Code shall not apply to any projects in the Prison Health Care Construction Program.

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15820.208. (a) Health-related facilities qualifying as "hospital buildings" under Section 129905 of the Health and Safety Code are state facilities and not subject to the jurisdiction of a local building department. The Medical Care Receiver shall have the same rights and responsibilities as the department as set forth in Section 129905 of the Health and Safety Code with respect to any hospital building, as defined in that section, for purposes of the Prison Health Care Construction Program.

- (b) Health-related facilities may be classified as any of the categories of "health facility" under Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code appropriate to the particular facility. Health-related facilities that would qualify as "acute psychiatric hospitals" under Section 1250 of the Health and Safety Code shall not require prior approval of plans and specifications for construction by any state entity other than the board.
- SEC. 2. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

Immediate commencement of the design and construction under the Prison Health Care Construction Program at existing prisons or at other appropriate state-owned real property is necessary to make available additional treatment space and housing for inmates and to assist the state in complying with matters relating to the cases Plata v. Schwarzenegger (No. C01-01351-TEH), Coleman v. Schwarzenegger (No. CIV S-90-00520-LKK-JFM), Perez v. Tilton (No. C05-05241 JSW), and Armstrong v. Schwarzenegger (No. C94-02307-CW). Therefore, it is necessary that this act take effect immediately.